

MAR 02 2022

Nathan Ochsner, Clerk
Laredo Division

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United States Courts
Southern District of Texas
Laredo

February 24, 2022

Frank Joseph Sawka - Inmate s.i.d. na 8898457 473405MD3
T.D.C.J.-I.D.-N4 Unit Dolph Briscoe Cotulla Facility
610 Ranch 624 Rd. HC62 Box 100
Cotulla, TX 78014-5022 Fed. Tex. Bar Lic. no. _____

United States District Court Laredo Division Clerk
Judicial Southern District (Texas) to S.C.O.T.U.S.A.
c/o Aimee Veliz, Deputy-District Clerk Darlene Hansen
George P. Kazen Federal Building COURTHOUSE
1300 Victoria St. Room 1131
Laredo, TX 78040

Attention: Civil Matters-Deputy (A.) Veliz-in charge
Sawka v. Texas Department of Criminal Justice, et al.
(2/2022; D.J., Kazen (G.) [Senior])

RE: Tendering initial attempt on exhaustion to Statutory
Prison Grievance O.G.O.M. protocol went evasive
and futile pattern made through failure of State to
inquire into allegations on merits thereby inherent
fact being harm continues coincidental screening
method yields loophole however official attempts
in part failure upon ministerial action, bad faith
deprivation exemplifies requisite for Judicial
jurisdiction and oversight to enforce substantive
amid procedural protections of Due Process
Clause, Fourteenth Amendment on Constitution.

Respectfully District Judge and Clerk Hansen:
Please, would it please the District Court to file:
admit after proffer both original State forms
*I-127 and *I-128, being show onto exhaustion
prerequisite Title 28 U.S.C.A. § 2254, Title 42
U.S.C.A. § 1983 [Thomson 2011]? Thank you. Oath
Cordially yet on file? Legal Enclosure- 2x U.S.P.S. 1st class forever

Frank Joseph Sawka

473405MD3 Sawka, Frank Joseph

C.J.J., King, Dennis

1 - (1 leaf) Instrument to Dist. Court
2 - (4 leaf) Documentary Plaintiff's
proffer to then admit into evidence
(email) Ch. D.J. Rosenthal, D.J. Kazen

Affirmed Instrument

FILED

FJS



Texas Department of Criminal Justice

OFFICE USE ONLY

STEP 1

OFFENDER GRIEVANCE FORM

Offender Name: Frank Joseph Sawka TDCJ # 1736235
 Unit: N4 Cotulla Housing Assignment: E-13
 Unit where incident occurred: N4 Dolph Briscoe Cotulla
E-13

Grievance #: _____
 Date Received: _____
 Date Due: _____
 Grievance Code: _____
 Investigator ID #: _____
 Extension Date: _____
 Date Retd to Offender: _____

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing. ATD Director (B) Lumpkin
 Who did you talk to (name, title)? Senior Warden (M.) Ramirez When? 2021-2022/22/02
 What was their response? Inadequate relief from injuries consequent to event.
 What action was taken? Officials left me with serious bodily injury (altercation)

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate
I sought State Prison Official's oversight after I was moved from dormitory letter "O" when I had sustained serious bodily injuries using #1-60 and HSA-9 and Step 1 without any reasonable medical care timely given nor prudent dental care through failure to yield adequate relief from injuries having failure to protect the person of mine being Offender 01736235 I.D. Sawka, Frank Joseph, 473-405 MD3, from harm by action caused in the altercation then on second quarter 2021, upon security operations emergency response, tardy and having failure to prevent injury amid harm attendant in the coincidence State Police documentation on wounds, detail corroborating medical observation visual and data record being additional to mouth film detail and dental document on radiology X-ray taken of upper molar, impacted tooth incomplete medical diagnosis on follow up to dizziness in the conditions regarding eyesight impediment together rational presence being substantial concussion injury even though I had waited on internal medical audit meant to double check any health injury, the Official was given #1-60 through Warden I written notice on tooth issue where the idea unexplained extraction plan professional claim were both odd depictions to describe detail altogether, being, I've suffered severe harm and injury till now, I understand.

FEB 23, 2022
 (OVER)

FEB 23, 2022

Action Requested to resolve your Complaint.

Provide to me relief through the Federal District Court Laredo Div., Southern District of Texas, D.J. Kazen, please. FEB 23, 2022

Offender Signature: Eni Lopez ArizDate: 02-22-2022

Grievance Response:

Signature Authority: _____

Date: _____

If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investigator within 15 days from the date of the Step 1 response. State the reason for appeal on the Step 2 Form.

Returned because: *Resubmit this form when the corrections are made.

- ☒ 1. Grievable time period has expired.
- ☐ 2. Submission in excess of 1 every 7 days. *
- ☐ 3. Originals not submitted. *
- ☐ 4. Inappropriate/Excessive attachments. *
- ☐ 5. No documented attempt at informal resolution. *
- ☐ 6. No requested relief is stated. *
- ☐ 7. Malicious use of vulgar, indecent, or physically threatening language. *
- ☐ 8. The issue presented is not grievable.
- ☐ 9. Redundant, Refer to grievance # _____
- ☐ 10. Illegible/Incomprehensible. *
- ☐ 11. Inappropriate. *

UGI Printed Name/Signature: S. Rios / S. Rios

Application of the screening criteria for this grievance is not expected to adversely affect the offender's health.

Medical Signature Authority: _____

I-127 Back (Revised 11-2010)

OFFICE USE ONLY

Initial Submission UGI Initials: SRGrievance #: W22067360Screening Criteria Used: 899 01Date Recd from Offender: 2/23/22Date Returned to Offender: 2/23/222nd Submission UGI Initials: _____

Grievance #: _____

Screening Criteria Used: _____

Date Recd from Offender: _____

Date Returned to Offender: _____

3rd Submission UGI Initials: _____

Grievance #: _____

Screening Criteria Used: _____

Date Recd from Offender: _____

Date Returned to Offender: _____



Texas Department of Criminal Justice

STEP 2 OFFENDER GRIEVANCE FORM

E-13

Offender Name: Frank Joseph Sawka TDCJ # 1736235
 Unit: N4 Cotulla Housing Assignment: E-13T
 Unit where incident occurred: N4 Dolph Briscoe-Cotulla

OFFICE USE ONLY

Grievance #: _____
 UGI Recd Date: _____
 HQ Recd Date: _____
 Date Due: _____
 Grievance Code: _____
 Investigator ID#: _____
 Extension Date: _____

You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unprocessed.

Give reason for appeal (Be Specific). *I am dissatisfied with the response at Step 1 because...*

State Grievance and Institutional Division Warden and Criminal Institutions Division Directors and Warden will not reasonably address fact alleged in context to the detail wrote on Step 1 thereby denied any actual conduct claiming responsibility for welfare and health of mine being consequential illegality through State Prison Officials' omissions and actions, even overly reliant upon cookie cutter answers where Offender Sawka has presented and stated the claim, meantime those Officials' behavior ignore stare decisis with novel rule of both statutory and federal law, I reasoned?

Please submit original Step 1 with Step 2. Appendix G

Offender Signature: _____

Frank Joseph Sauls

Date: _____

02-23-2022

Grievance Response: _____

Signature Authority: _____

Date: _____

Returned because: **Resubmit this form when corrections are made.*

- ☐ 1. Grievable time period has expired.
- ☐ 2. Illegible/Incomprehensible.*
- ☐ 3. Originals not submitted.*
- ☐ 4. Inappropriate/Excessive attachments.*
- ☐ 5. Malicious use of vulgar, indecent, or physically threatening language.
- ☐ 6. Inappropriate.*

CGO Staff Signature: _____

OFFICE USE ONLY**Initial Submission**

CGO Initials: _____

Date UGI Recd: _____

Date CGO Recd: _____

(check one) ☐ Screened ☐ Improperly Submitted

Comments: _____

Date Returned to Offender: _____

2nd Submission

CGO Initials: _____

Date UGI Recd: _____

Date CGO Recd: _____

(check one) ☐ Screened ☐ Improperly Submitted

Comments: _____

Date Returned to Offender: _____

3rd Submission

CGO Initials: _____

Date UGI Recd: _____

Date CGO Recd: _____

(check one) ☐ Screened ☐ Improperly Submitted

Comments: _____

Date Returned to Offender: _____